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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS										
			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 564 OF 760 (check only one)						
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	ion copied from such Reports ar ercial purposes, other than using									
NAME OF	COMMITTEE (In Early			·					•	
	COMMITTEE (In Full) for Nevada									
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Full Name	(Last, First, Middle Initial)				*	-				
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A. Mailing Ad	Mailing Address PO Box 441146			Dat	e of Re	ceipt	-			
	To Box 11110			",	09 /	19	• I ′ I	2017	'	
City		State	Zip Code			-				
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Receipt F	or: 2019			×	Memo	Item				
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	er (specify) ▼		007712.11		Note: Above Contribution earmarked through organization.			ınrougn tnı		
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Name of I	Employer	Occupation						2700	.00	
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wamig /	ddress 211 S Orange Grove Blvd			M	09 /	26	ן י	2017	•	
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rederar pe	militar committee.				-	•				
Name of	Employer	Occupation						250	.00	
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Other (specify)			250.00	I I ∗ Fai	* Earmarked Contribution: See Below					
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CURTOTAL	of Possinta This Page (anti-nell							2950	.00	
SUBTUIAL	of Receipts This Page (optional)					\rightleftarrows	-			
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